1937

Annual Report

OF THE

Medical Officer of Health

OF THE

Urban Sanitary Authority

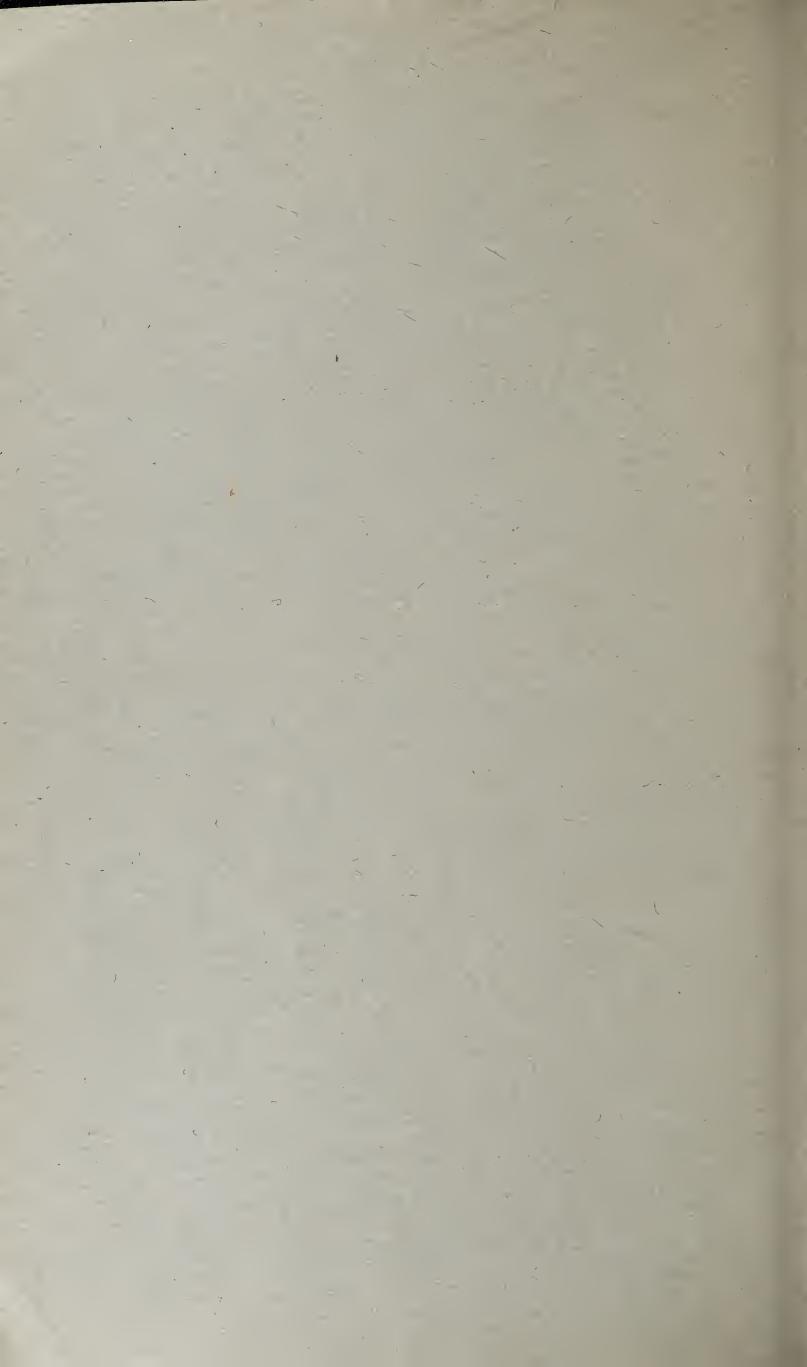
OF

EAST DEREHAM NORFOLK

EAST DEREHAM

PRINTED BY H. E. WEBSTER, MARKET PLACE.

1938



East Dereham Urban District

REPORT FOR 1937

Sec. A. STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in Acres)		• • •	5,680
Population (Census 1931)	• • •	• • •	5,643
Population (Registrar-General's	estimate, 1	937)	5,820
Number of inhabited houses, (en			1,827
Rateable value	• • •		£23,283
Sum represented by a penny rate		• • •	£88

The chief industries carried on in the area are Engineering, Agriculture and Malting.

Unemployment has not been a very important factor in the social conditions of the inhabitants. What alteration there has been since last year has been for the better.

The estimated population for 1937 shows an increase of 23 as compared with the previous year. Births outnumbered deaths by 5.

EXTRACTS FROM THE VITAL STATISTICS OF THE YEAR-

			Total	\mathbf{M}	\mathbf{F}
Live Rivths	$\{\begin{array}{c} \text{Legitimate} \\ \text{Illegitimate} \end{array}\}$	• • •	72	27	45
LIVE DITUES	Illegitimate	• • •	1	1	0

Birth Rate per 1,000 of the estimated resident population:—12.54

		Total	M	F
Still Births {Legitimate Illegitimate	• • •	3	1	2
Illegitimate	• • •	0	0	0
Deaths	• • •	68	42	26

Death Rate per 1.000 of the estimated resident population:-11.68

Deaths fr	om Puerperal caus Puerperal sepsis Other puerperal ca	• • •	•••	•••	Nil Nil	
Maternal	mortality Rate pe	r 1,000 total	(live and	still) birt	hs:— Nil	
Death rate of infants under one year of age: All infants per 1,000 live births 41.09 Legitimate infants per 1,000 legitimate live births Illegitimate infants per 1,000 illegitimate live births Nil						
Deaths fr	om Cancer (all age ,, Measles (all ag ,, Whooping cou ,, Diarrhoea (und	es) gh (all ages)		•••	11 Nil Nil Nil	

The Birth Rate (12.54 per 1,000 pop.) is 1.26 lower than in 1936 and constitutes the lowest rate ever recorded for the District. The rate for England and Wales was 14.9.

The marked fall in the birth rate during the last 30 years is shown in the following table:

Year	Birth Rate	Year	Birth Rate
1928	15.80	1898	24.18
1929	12.87	1899	27.45
1930	15.77	1900	24.36
1931	16.01	1901	22.36
1932	15.38	1902	26.33
1933	14.55	1903	22.36
1934	14.06	1904	21.82
1935	13.77	1905	18.75
1936	13.80	1906	21.28
1937	12.45	1907	23.26
	-		

There were three deaths of infants under one year of age as compared with one in the previous year, giving a rate of 41.09 per 1,000 live births. One infant died from being overlaid, one was premature and the other died in the Jenny Lind Hospital following an operation.

Aver. for 10 years: 23.21

Aver. for 10 years: 14.54

30 years ago the infantile death rate was more than three times as great as it has been in recent years. This is shown in the following table:

Year per	Death rate	ths Year	Death rate per 1,000 live births
1928	58.1	1898	195.48
1929	28.16	1899	172.11
1930	34.48	1900	179.10
1931	55.5 5	1901	161.29
1932	22.72	1902	136.90
1933	72.28	1903	193.50
1934	61.72	1904	90.90
1935	37.5	1905	76.92
1936	12.5	1906	93.22
1937	41.09	1907	116.27
verage:	42.41	10 years Average:	141.57

10 yrs. A

The Death Rate, (11.68 per 1,000 pop.), is 1.25 lower than in 1936 and only .75 above the lowest rate recorded, which was in 1934.

The average death rate for the last decade was 12.79 as compared with 14.22 over a similar period 30 years ago. This reduction is very satisfactory, taking into account the fact that the average age of the population has increased considerably during the current Century.

In order to make the death rate for individual areas comparable with that for the country as a whole, the Registrar-General has provided an adjusting factor for each area. This factor allows for dissimilarly constituted populations and represents the population handicap to be applied to each area.

The adjusting factor for this area is 0.80 and, using this figure, the adjusted rate becomes 9.34, which compares with the National average of 12.4.

37 of the 68 deaths were of persons over 70 years of age, equal to 54 per cent., viz.:

			Total	M	F
70-80	• • •		17	12	5
80-90		• • •	17	10	7
Over 90	• • •		3	1	2

Causes of Death.

			Total	M	F
Respiratory Tuberculos	is	• • •	4	2	2
Pneumonia	• • •	• • •	4	3	1
Cancer		• • •	11	5	6
Cerebral hæmorrhage	* * *	• • •	1	1	0
Heart disease			24	16	8
Other circulatory diseas	es	• • •	5	2	3
Bronchitis		• • •	2	0	2
Diabetes		• • •	1	0	1
Aneurysm	• • •	• • •	1	1	0
Digestive diseases		• • •	1	1	0
Nephritis (acute and ch	ronic)		1	1	0
Violence	• • •	• • •	3	2	1
Congenital diseases	• • •	• • •	1	0	1
Appendicitis		• • •	1	1	0
Typhoid and paratypho	id fever		1	1	0
Influenza	• • •		1	1	0
Erysipelas			1	0	1
Other defined causes	• • •		5	5	0
				-	
			68	42	26
			-		

Sec. B. GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA.

The Public Health Staff of the District Council consists of a part-time Medical Officer of Health and a Sanitary Inspector.

A Midwife and Maternity Nurse is supported by the Dereham Maternity Nursing Association who acts as Child Welfare Nurse under the Norfolk County Council and conducts an Infant Welfare Centre in the Town once a month.

A District Nurse is provided by the Dereham Nursing Association.

The County Laboratory at Norwich undertakes all bacteriological examinations in connection with notifiable infectious diseases.

The services of a bacteriologist are available to assist in the diagnosis of suspected cases of Cerebro-spinal fever, and Diphtheria anti-toxin is supplied to medical practitioners by the District Council under the supervision of the Medical Officer of Health. House disinfection is carried out by the Sanitary Inspector.

The Central Isolation Hospital for infectious diseases was nearing completion at the end of the year and should be open by the middle of 1938. There will be accommodation for 60 patients.

The County Council offers assistance in diagnosis and treatment to the notifying practitioner in each new case of Tuberculosis. Ambulatory cases are seen at the Norwich Tuberculosis Dispensary while those unable to travel are visited by a tuberculosis officer at their homes. Sanatorium treatment is provided when necessary and open-air treatment shelters are installed for suitable cases where sufficient space is available adjoining their homes.

Accommodation has been provided by the County Council for 20 cases of small-pox by reconditioning part of the former Walsingham Public Assistance Institution.

The Public Assistance Institution at Gressenhall is available for cases receiving medical relief through public assistance committees. There is a small isolation block for infectious cases.

During the year, the County Council inaugurated a scheme whereby any woman booking her confinement with a midwife is offered a free ante-natal examination by a medical practitioner. The services of a consultant obstetrician are available where necessary and difficult cases may be admitted to the Norfolk & Norwich Hospital.

All maternal deaths are investigated by the County Medical Officer of Health on behalf of the Maternal Mortality Committee of the Ministry of Health.

The County Council administers a Dental Scheme which provides dental treatment for necessitous expectant and nursing mothers. Selected cases contribute towards the cost of treatment and provision of dentures according to their financial circumstances.

Under the Maternity and Child Wellfare Act, 1918, the County Council makes free grants of milk to necessitous expectant or nursing mothers and infants under one year of age. Cases are recommended by medical practitioners, midwives and health visitors to the County Medical Officer of Health.

An Orthopædic Scheme under the County Council provides treatment for crippling defects occuring in children from birth up to the age of 16, tuberculous patients and cases receiving medical relief through public assistance committees being eligible for treatment at any age. Cases are reported to the County Medical Officer of Health by medical practitioners, health visitors, district nurses, &c. The children are visited by the Orthopædic

Nurse and, if necessary, referred to the Council's Orthopædic Surgeon for examination at the Jenny Lind Hospital, Norwich. Institutional treatment is provided at the County Council's Orthopædic Hospital at Great Yarmouth, where is accommodation for 40 beds.

Institutional treatment is available for in-patients and outpatients at the Norfolk & Norwich Hospital and the Jenny Lind Hospital for Children, Norwich. Rate aided cases of mental disease are sent to St. Andrew's Mental Hospital, Norwich, and a psychological clinic is held at the Norfolk & Norwich Hospital once a fortnight.

A motor ambulance is provided for the District under the auspices of the Joint Council of the Order of St. John and the British Red Cross Society. Members of the St. John Ambulance Brigade are available with the ambulance to accompany male cases, whilst members of the Red Cross Unit serve in a similar capacity for female cases.

Sec. C. SANITARY CIRCUMSTANCES OF THE AREA.

(1) WATER.

A sample of the town water as it reaches the consumer was taken on the 26th November, and sent to Mr. Lincolne Sutton, the Norwich analyst, for chemical and bacteriological examination. The report was as follows:

"Appearance.—Slight ediment of chalk, with spongioles and a small nematode worm.

Total Solids in Solution	Ammonia		Chlorine	Nitrogen		
	Free and Saline	Albuminoid	in Chlorides	a s Nitrates	Nitrites	
17.15	nil	trace	1.7	nil	nil	

Oxygen	Hard	lness	Bacteriological Results	
absorbed from Permanganate	Total	Perman- ent.	Bacteria per c.c. on agar at 37° C.	B. Coli absent in 100 c c.
0.025	110	30	1	B. Welchii absent in 30 c.c. B. Aerogenes present in 65 c.c.

Remarks.—This water is of great organic purity and free both chemically and bacteriologically from any sign of pollution of a dangerous character. The presence of B. Aerogenes is probably connected with conditions where the sample was taken or may be connected with the sediment. The latter is not such as one would wish to see in a public supply and suggests that the main requires flushing.

A second sample was taken on the 8th December, to confirm the bacteriological findings, with the following results:

Organisms growing on agar at 37° C. per c.c. ... 4
Bacillus Coli ... absent in 100 c.c.
B. Welchii ... absent in 100 c.c.
B. Aerogenes ... present in 5 c.c.

Remarks.—The blood-heat count is good, and there is no evidence whatever of faecal organisms, whilst the chemical condition of the water has already been shown to be very good.

The water, however, should not contain B. Aerogenes to the extent it does. These organisms are associated with surface influence—dust and dirt. If drawn direct from a main through a tap sterilised at moment of collection, it is difficult to explain their presence unless the softening process is responsible. For a public supply, the bacteriological condition in this respect is not satisfactory, and I suggest it should be looked into."

It is clear that the water is contaminated during the processes of softening, storing and/or delivery, and the matter has been closely investigated by the District Medical Officer of Health with the co-operation of the Council's Waterworks Manager. The causes of contamination found were:

- (i) Surface pollution of the water in the softening tanks.
- (ii) Inadequate softening, whereby an excess of chalk is carried forward into the mains.
- (iii) Inadequate flushing of the mains, where sediment accumulates, particularly at the dead ends.
- (iv) Accumulated deposit in the storage tank in the tower, which has not been cleaned out for many years.

Supply and Storage—

The average yield of the Works, well and bore, is about 8,000 gallons per hour, which has been well maintained as long as pumping has taken place. During the last seven years the consumption has increased considerably, the average daily output having reached 95,000 gallons as compared with 60,000 gallons in 1930. The maximum daily output has been 110,000 gallon

This increased demand follows upon a number of extensions of supply, notably in connection with the large number of new houses erected, and the extension of the supply to the Toftwood area and the golf links. A considerable quantity is also used by the swimming bath.

A further call upon the Works will follow upon the opening of the Central Isolation Hospital next year.

In 1930 the storage capacity only represented half a day's consumption and now it corresponds to only four hours demand.

From these facts, it is obvious that the storage capacity is quite inadequate to meet the present and probable consumption in the future. The question of supply must also be considered, and representations are being made to the District Council recommending the urgent necessity of increasing the supply and storage and the provision of a larger and more efficient softening plant.

In the meantime, the defects in purity are being remedied as far as possible.

Extensions-

A 4" cast iron pipe has been laid from the Works to the new Isolation Hospital, a distance of 60 yards. This main will allow a high pressure to be obtained in case of fire at the Hospital.

The existing main in Westfield Road has been extended for a distance of some 60 yards.

(2) Drainage and Sewerage—

The new Sewage Works have been in full use since October 1936, and it is now possible to review the results obtained over a full year's working. A snap sample of the final effluent taken in January was examined by Drs. Beale and Suckling who reported that it contained an excess of suspended and organic matter. The unsatisfactory nature of this report was referred to the designer of the Works, and, as a result, a specialist in sewage disposal was engaged for five weeks to take over complete charge of the Works and make a thorough investigation. Various minor alterations and additions were made and the Council's employée in charge received full instruction as to the proper working of the plant. A sample of the effluent taken in June showed a considerable improvement upon that taken in January and this was still further improved upon a fortnight later. These two samples were average samples taken over 24 hours and are not, therefore, strictly comparable with the sample taken in January.

A further snap sample taken in August showed still further improvement, particularly as regards nitrification. It must be remembered that, when the January sample was taken, the Works were having to cope with the seasonal discharge of steeps from the three maltings in the Town, which takes place from October to May, whereas the later samples were taken after malting had ceased. With a view to deciding what effect the discharges from the maltings had upon the effluent produced at the Works, samples of the steeps were taken and examined by Drs. Beale and Suckling. All three were reported upon similarly. The liquid was found to be fermenting and slightly acid in reaction with a very high oxygen destroying capacity and equal in strength to not less than three times that of "strong" sewage on the basis of the Royal Commission's formula in regard to sewage. conclusion reached, therefore, was that the steeps from the maltings were the prime cause of the unsatisfactory effluent, and the matter is receiving the immediate attention of the District Council.

(3) RIVERS AND STREAMS.

The condition of the Toftwood ditch is still unsatisfactory, evidence of pollution from the Gasworks still being present.

(4) CLOSET ACCOMMODATION.

A further 12 pail closets were converted to W.C's. by informal action of the Council during the year. Since 1930, 203 pail closets have been converted to the water carriage system. Of these, 2 followed upon service of statutory notices, 182 as a result of informal action and 19 were carried out voluntarily.

There still remain 319 pail closets in the central parts of the Town, 227 of this number being situated within 100 feet of the sewer mains.

From these figures, it will be seen that the existing closet accommodation in the Town is still far from satisfactory, though a large number of the properties without W.C. accommodation are of a poor type and let at very low rentals.

It is proposed to take further steps to effect conversions to the water carriage system, commencing with those within 100 feet of the sewers.

(5) Puplic Cleansing.

Pail closets, privy vaults and cesspools are emptied regularly, and household refuse is removed to the Council's refuse dump. Owing to the nuisance caused by smoke from the dump, a water main has been laid on to extinguish outbreaks of fire. This measure, combined with other minor improvements, has largely mitigated the nuisance.

Sanitary bins are provided by the District Council for houses with assessments not exceeding £8 per annum and replaced when worn out.

(6) SANITARY INSPECTION OF THE AREA.

Summary of duties carried out by the Sanitary Inspector: Houses and premises inspected 310 . . . Nuisances abated 120 Cases of overcrowding abated 1 19 Houses and premises disinfected Defective W.C.'s repaired by owners 20

There is a Swimming Bath in the Town which has recently been taken over by the District Council. Water is obtained from the Council's waterworks and replenished at intervals, about 500 gallons of fresh water being added daily. Purification is effected by a pressure filter and a "Bell" gas chlorinator, the concentration of chlorine in the water being kept between .03 and .05 per million gallons. The water, as well as the building, is heated to any desired temperature and aerated by passing over a cascade. Analyses of the water have proved satisfactory.

(8) Schools.

All the Schools in the District are connected to the Town water supply. Except at Toftwood, where sanitation is provided by the "dry-solid" system, all the Schools have W.C. accommodation.

Sec. D. HOUSING

No further houses have been erected by the District Council during the Year.

Following upon further representations by the District Medical Officer of Health during the Year, demolition orders were made in respect of 9 houses and undertakings were accepted from owners in respect of a further 5 that they would not be re-let on completion of existing tenancies.

Number of houses erected in the District during the Year:

- By the Local Authority Nil 8
- By other bodies or persons

The privately erected dwellings comprise two one-storey dwellings and six bungalows.

There has been a definite slowing up of private house construction during the past two years. Nevertheless, 166 privately owned dwellinghouses have been erected during the last six years as compared with 54 during the 13 years prior to 1931, when the marked increase in house construction commenced.

Total number of houses erected by the District Council up to the end of 1937:—

Housing	Act,	1919		10
"	,,	1923		4
,,	,,	1924		50
,,	,,	1930		62
		Total	• • •	126

Housing Statistics. 1. Inspection of Dwelling-Houses during the Year:-(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) 250 (b) Number of inspections made for the purpose ... 290 (ii) (a) Number of dwelling-houses (including under sub-head (i) above) which were inspected and under the Housing Consolidated recorded Regulations, 1925 150 (b) Number of inspections made for the purpose ... 150 Number of dwelling-houses found to be in a state so (iii) dangerous or injurious to health as to be unfit for human habitation. 28 Number of dwelling-houses (exclusive of those (iv)referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation. 6 Remedy of detects during the Year without service of formal notice :-Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers. 82

3.	Action	under Statutory Powers during the Year:—	
	\ /	ceedings under Sections 9, 10 and 16 of the lousing Act, 1936:	3
	(i)	Number of dwelling-houses in respect of which notices were served requiring repairs	. Nil
	(ii)	Number of dwelling-houses which were rendered fit after service of formal notices:—	1
		(a) By owners(b) By Local Authority in default of owners	
	(b)—Pro	ceedings under Public Health Acts:	
	(i)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	
	(ii)	Number of dwelling-houses in which defect were remedied after service of formal notices:—	
		(a) By owners(b) By Local Authority in default of owner	
		ceedings under Sections 11 and 13 of the Housing let, 1936:	g
	(i)	Number of dwelling-houses in respect of which Demolition Orders were made	9
	(ii)	Number of dwelling-houses demolished in pursuance of Demolition Orders	2
		oceedings under Section 12 of the Housing Act 936:	,
	(i)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	e
	(ii)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit.	e N.:1
	4. Hou	sing Act (1936) Part IV. Overcrowding:	
		Number of dwelling-houses overcrowded at end o	of
	(::\	the year	. 34
		Number of families dwelling therein	
	(111)	Number of persons dwelling therein	. 168

(b) Number of new during the year			rcrowdi		l Nil
(*) (i) Number of cases the year (ii) Number of p (d) Number of cases Clearance duri	persons of ove	 concerne rcrowdi	ed in su	ch cases	1 5 n N
Sec. E. INSPECT	ION A	ND SU	PERVI	SION	
(a) Milk Supply:— Milk and Daries		FOOD.			
(i) Number of 1	registere	d purve			19
(ii) Number of r sale purveyo			eepers	and whole-	26
Milk (Special Desig Number of regist	•				7
Milk Samples:					
32 samples of Norfolk County suspended or rev	Council				
Carcases inspected and co		v		-	Dige
No. killed (approx.) No. inspected	Beasts 884 52 0	Cows 54 20	Calves 84 52	$^{ m Sheep}$ & L 1820 1252	Pigs 1456 906
All diseases except tuberc	ulosis:—	-			
Whole carcases condemned Parts of carcases	Nil	Nil	Nil	Nil	Nil
condemned Percentage of No.	Nil	Nil	Nil	Nil	Nil
inspected affected with disease other than tuberculosis	Nil	Nil	Nil	Nil	Nil
Tuberculosis only:—					
Whole carcases condemned	Nil	Nil	Nil	Nil	Nil
Parts of carcases condemned Percentage of No.	Nil	Nil	Nıl	Nil	Nil
inspected affected with tuberculosis	Nil	Nil	Nil	Nil	Nil

Slaughter of Animals Act, 1933:—

The provisions of this Act are operative in the District, applying to sheep as well as other animals. Under the Act, all animals must be stunned before slaughter by a mechanically operated instrument and all slaughtermen must be over 18 years of age and licenced by the Local Authority.

Sec. F. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Disease			Total cases Notified	Cases admitted to Hospital	Total Deaths	
Smallpox	• • •	•••	Nil	Nil	Nil	
Scarlet Fever	• • •	• • •	8	Nil	Nil	
Diphtheria	• • •		Nil	Nil	Nil	
Enteric Fever (Including Paratyphoid)			Nil	Nil	1	
Puerperal Pyre	xia	• • •	1	1	Nil	
Pneumonia	• • •	• • •	8	1	4	
Erysipelas	•••	•••	3	Nil	1	

AGE GROUPS

Age Groups (years)	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	65 & over
Scarlet Fever	•••	***	• • •	•••	2	3	2	• • •	•••	1	• • •	•••
Pneumonia	1			•••	•••	1	1	1	1	1	1	2
Erysipelas	***	***	***	•••	•••		•••	• • •	•••	•••	2	1
Puerperal Pyrexia	***	•••		•••	•••	•••		•••	•••	•••	•••	***

SCARLET FEVER (8)—Two of the cases were not confirmed and a third remained doubtful. Of the remaining five, four were notified in January following upon an outbreak during the latter part of the previous year.

PUERPERAL PYREXIA (1)—This was a primipara who was admitted to the Norfolk & Norwich Hospital for her confinement. She was discharged on the fifth day and the fever commenced a day later. Recovery was uneventful at home.

ENTERIC FEVER (1)—This case was not notified before death, which took place at the Norfolk & Norwich Hospital.

PNEUMONIA (8)—Two of the fatal cases had not been notified. One case was notified from the Norfolk & Norwich Hospital and another was sent to the Hospital ten days after the onset.

While in Hospital the former case developed dysentry, (Sonne's), which was prevalent in Norwich at the time.

During the Autumn, a considerable rumber of cases of diarrhœa occured in the District and surrounding neighbourhood. The outbreak was clearly of an infective nature, the diarrhœa being accompanied by fever and the passage of blood and mucus. Though several bacteriological examinations were made at the County Laboratory, the presence of Sonne's baccillus was never actually revealed, through non-lactose fermenting colonies were found in most cases. The inconclusive bacteriological findings may be accounted for by the length of time necessarily elapsing between the collection of samples and their examination in Norwich. In any case, it is more than probable that the outbreak in question was the mild form of aysentry associated with Sonne's baccillus, this infection having been widely prevalent in the country during the last three years.

DIPHTHERIA—The provision of a scheme for immunisation against diphtheria has not yet taken place, but it is expected that it will shortly be forthcoming.

Cases of non-notifiable infectious diseases occuring at the elementary schools are notified to the County and District Medical Officers of Health by head teachers. Instructions are issued to the latter concerning the exclusion from school of sufferers and contacts and a health visitor under the County Council inspects the children at the schools and, when necessary, at their homes.

The following cases were reported by School Teachers:—

Infants	Influenza and colds 4	Measles	Whooping cough	Chicken pox 27
Crown Road	-	1		$\overline{\overset{\cdot}{42}}$
London Road		6	14	16
Toftwood		17	-	4
	-			
	4	24	20	89

London Road School was closed seven days for Influenza.

British Empire Cancer Campaign —

The District Medical Officer of Health has agreed to act as Local Secretary for this organisation, which, amongst other activities, seeks to educate the public about the nature of Cancer and to encourage the early seeking of medical advice. A lecture on the subject was given during the Autumn by the District Medical Officer of Health under the auspices of the Dereham branch of Toc H, whose willing co-operation is gratefully acknowledged.

TUBERCULOSIS

New cases and Mortality during 1937.

	New Cases				Deaths				
Age Groups	Respiratory		Non- respiratory		Respiratory		Non- respiratory		
	M	F	M	F	M	F	M	\mathbf{F}	
0 — 1									
1 — 5							_	_	
5 — 15				2	_				
1 5 — 25	-	1		парат				_	
25 — 35		1	1		1	1	-	_	
45 — 55	1	1	1		1	1			
55 — 65	_		_		_				
65 & upwards	_								
Totals	1	3	2	2	2	2	0	0	

All the fatal cases had been notified before death.

At the end of the year there were 74 cases of Tuberculosis on the District Register, of which 29 were respiratory and 45 non-respiratory.

NORMAN E. D. CARTLEDGE,

Medical Officer of Health.

